Inventor One Given Name:: Dianne M

Family Name:: Perez

Postal Address Line One:: 6513 Harris Road

City:: Broadview Heights State or Province:: Ohio

Country:: US

Postal or Zip Code:: 44147

City of Residence:: Broadview Heights State or Province of Residence:: Ohio

Country of Residence:: US Citizenship Country:: US

Inventor Two Given Name:: Michael J

Family Name:: Zuscik

Postal Address Line One:: 1535 Crossings Parkway

City:: Westlake

State or Province:: Ohio

Country:: US

Postal or Zip Code:: 44145 City of Residence:: Westlake

State or Province of Residence:: Ohio

Country of Residence:: US Citizenship Country:: US

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 24024

Fax One:: 241-0816

Electronic Mail One:: pdocherty@calfee.com

APPLICATION INFORMATION

Title Line One:: MODEL SYSTEMS FOR NEUORDEGENERATIVE AND

Title Line Two:: CARDIOVASCULAR DISORDERS

Total Drawing Sheets:: 23 Formal Drawings?:: Yes Application Type:: Utility Docket Number:: 26473/04200

Secrecy Order in Parent Appl.?:: No

REPRESENTATIVE INFORMATION

Representative Customer Number:: 24024

Registration Number One:: 40591

CONTINUITY INFORMATION

This application is a:: DIVISION OF

j J ij M Ö ij j -

. 🚣 Ü

ïIJ

j. 📤

 > Applicat One:: 09/568,255 Filing Date:: 05-10-2000

Source:: PrintEFS Version 1.0.1